

CHANGE TO YOUR AETNA EXPLANATION OF BENEFITS (EOB) DELIVERY
EFFECTIVE January 1, 2017

- As an Aetna member, you will no longer automatically receive paper Explanation of Benefits (EOBs) if your claims are for services covered in full (i.e. preventive care services which are covered at 100%) or if your responsibility is a copayment paid at time of service.
- Aetna is making this change in an effort to deliver an improved member experience and help to avoid unnecessary confusion, as Aetna has received feedback on how confusing it can be for members to receive EOBs when they do not owe money for services (other than copays paid at the time of the service) and no action is required on their part.
- You will continue to receive paper EOBs for all other claims for services, unless you chose to receive electronic notifications. Examples of claims for other services include:
 - services which are subject to a deductible or a coinsurance as applicable for members enrolled in the CDH Gold plan;
 - out of network services for members enrolled in the CDH plan
- If you need a paper EOB for any service received under your Aetna plan, you can view and print them directly from the member [website](#). You can also request one by calling Aetna Member Service at the number on the back of your ID card.
- You can also receive real-time email alerts (electronic notifications) as soon as your claims activity is available. To elect this option, click on the link "your profile" on the homepage of Aetna's [website](#). On the Paper Saving Preferences page, check the "Turn off paper" box and save your preferences.